

SEP 08 2005

PTO/SD/21 (09-04)

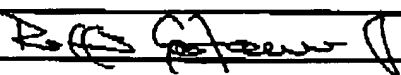
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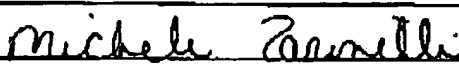
|   |                        |                   |
|---|------------------------|-------------------|
| <b>TRANSMITTAL FORM</b><br><br>(to be used for all correspondence after initial filing) | Application Number     | 09/785,048        |
|   | Filing Date            | February 15, 2001 |
|   | First Named Inventor   | Mark J. Pettay    |
|   | Art Unit               | 2655              |
|   | Examiner Name          | James S. Wozniak  |
|   | Attorney Docket Number | PAT-008           |
| Total Number of Pages in This Submission  |                        | 4                 |

| ENCLOSURES (Check all that apply)   |  |   |
|---|--|---|
| <input checked="" type="checkbox"/> Fee Transmittal Form<br><input checked="" type="checkbox"/> Fee Attached<br><input type="checkbox"/> Amendment/Reply<br><input type="checkbox"/> After Final<br><input type="checkbox"/> Affidavits/declaration(s)<br><input type="checkbox"/> Extension of Time Request<br><input type="checkbox"/> Express Abandonment Request<br><input type="checkbox"/> Information Disclosure Statement<br><input type="checkbox"/> Certified Copy of Priority Document(s)<br><input type="checkbox"/> Reply to Missing Parts/Incomplete Application<br><input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.62 or 1.63 | <input type="checkbox"/> Drawing(s)<br><input type="checkbox"/> Licensing related Papers<br><input type="checkbox"/> Petition<br><input type="checkbox"/> Petition to Convert to a Provisional Application<br><input type="checkbox"/> Power of Attorney, Revocation<br><input type="checkbox"/> Change of Correspondence Address<br><input type="checkbox"/> Terminal Disclaimer<br><input type="checkbox"/> Request for Refund<br><input type="checkbox"/> CD, Number of CD(s) _____<br><input type="checkbox"/> Landscape Table on CD | <input type="checkbox"/> After Allowance Communication to TC<br><input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences<br><input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)<br><input type="checkbox"/> Proprietary Information<br><input type="checkbox"/> Status Letter<br><input checked="" type="checkbox"/> Other Enclosure(s) (please identify below)<br>Request for Continued Examination |
| Remarks   |  |   |

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

|              |   |          |        |
|--------------|---|----------|--------|
| Firm Name    | West Corporation  |          |        |
| Signature    |  |          |        |
| Printed name | Raffi Gostanian   |          |        |
| Date         | 9/8/05  | Reg. No. | 42,595 |

## CERTIFICATE OF TRANSMISSION/MAILING

|   |   |      |          |
|---|---|------|----------|
| I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below: |   |      |          |
| Signature   |  |      |          |
| Typed or printed name   | Michele Zarinelli   | Date | 9-8-2005 |

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PTO/SB/17 (12-04v2)

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Effective on 12/08/2004.  
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818)**FEE TRANSMITTAL  
For FY 2005**☐ Applicant claims small entity status See 37 CFR 1.27TOTAL AMOUNT OF PAYMENT (\$) **790.00****Complete if Known**

|                      |                   |
|----------------------|-------------------|
| Application Number   | 09/785,048        |
| Filing Date          | February 15, 2001 |
| First Named Inventor | Mark J. Pettay    |
| Examiner Name        | James S. Wozniak  |
| Art Unit             | 2655              |
| Attorney Docket No.  | PAT-008           |

**METHOD OF PAYMENT (check all that apply)**

☐ Check ☒ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): \_\_\_\_\_

☒ Deposit Account Deposit Account Number 501880 Deposit Account Name West Corporation

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee

☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 ☐ Credit any overpayments

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**FEE CALCULATION****1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

| Application Type | FILING FEES |                       | SEARCH FEES |                       | EXAMINATION FEES |                       | Fees Paid (\$) |
|------------------|-------------|-----------------------|-------------|-----------------------|------------------|-----------------------|----------------|
|                  | Fee (\$)    | Small Entity Fee (\$) | Fee (\$)    | Small Entity Fee (\$) | Fee (\$)         | Small Entity Fee (\$) |                |
| Utility          | 300         | 150                   | 500         | 250                   | 200              | 100                   |                |
| Design           | 200         | 100                   | 100         | 50                    | 130              | 65                    |                |
| Plant            | 200         | 100                   | 300         | 150                   | 160              | 80                    |                |
| Reissue          | 300         | 150                   | 500         | 250                   | 600              | 300                   |                |
| Provisional      | 200         | 100                   | 0           | 0                     | 0                | 0                     |                |

**2. EXCESS CLAIM FEES**

| Fee Description  | Fee (\$)                         | Small Entity Fee (\$) |
|--|----------------------------------|-----------------------|
| Each claim over 20 (including Reissues)                                | 50                               | 25                    |
| Each independent claim over 3 (including Reissues)                     | 200                              | 100                   |
| Multiple dependent claims  | 360                              | 180                   |
| <b>Total Claims</b>  | <b>Extra Claims</b>              | <b>Fee (\$)</b>       |
| - 20 or HP = _____ x _____ = _____                                     |                                  |                       |
| HP = highest number of total claims paid for, if greater than 20.      |                                  |                       |
| <b>Indep. Claims</b>   | <b>Extra Claims</b>              | <b>Fee (\$)</b>       |
| - 3 or HP = _____ x _____ = _____                                      |                                  |                       |
| HP = highest number of independent claims paid for, if greater than 3. |                                  |                       |
|  | <b>Multiple Dependent Claims</b> |                       |
|  | <b>Fee (\$)</b>                  | <b>Fee Paid (\$)</b>  |

**3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(c)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

|                     |                     |   |                 |                      |
|---------------------|---------------------|---|-----------------|----------------------|
| <b>Total Sheets</b> | <b>Extra Sheets</b> | <b>Number of each additional 50 or fraction thereof</b> | <b>Fee (\$)</b> | <b>Fee Paid (\$)</b> |
| - 100 = _____       | / 50 = _____        | (round up in a whole number) x _____                    | = _____         |                      |

**4. OTHER FEE(S)**

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): Request for Continued Examination**Fees Paid (\$)****790.00****SUBMITTED BY**

|                   |   |                                   |        |           |              |
|-------------------|---|-----------------------------------|--------|-----------|--------------|
| Signature         |  | Registration No. (Attorney/Agent) | 40,480 | Telephone | 972-849-1310 |
| Name (Print/Type) | Rami Gostanian  | Date                              | 9/8/05 |           |              |

This collection of information is required by 37 CFR 1.136. The information is required in order to obtain or retain a benefit by the public which is to file (and by the USPTO in process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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# Request for Continued Examination (RCE) Transmittal

Address to:  
Mail Stop RCE  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

|                        |                   |
|------------------------|-------------------|
| Application Number     | 09785.048         |
| Filing Date            | February 15, 2001 |
| First Named Inventor   | Mark J. Peltay    |
| Art Unit               | 2655              |
| Examiner Name          | James S. Wozniak  |
| Attorney Docket Number | PAT-008           |

This is a Request for Continued Examination (RCE) under 37 CFR 1.114 of the above-identified application. Request for Continued Examination (RCE) practice under 37 CFR 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application. See Instruction Sheet for RCEs (not to be submitted to the USPTO) on page 2.

1. **Submission required under 37 CFR 1.114** Note: If the RCE is proper, any previously filed unentered amendments and amendments enclosed with the RCE will be entered in the order in which they were filed unless applicant instructs otherwise. If applicant does not wish to have any previously filed unentered amendment(s) entered, applicant must request non-entry of such amendment(s).

- a. ☒ Previously submitted. If a final Office action is outstanding, any amendments filed after the final Office action may be considered as a submission even if this box is not checked.
- i. ☐ Consider the arguments in the Appeal Brief or Reply Brief previously filed on \_\_\_\_\_
- ii. ☒ Other Amendment filed on August 9, 2005.
- b. ☐ Enclosed
- i. ☐ Amendment/Reply
- iii. ☐ Information Disclosure Statement (IDS)
- ii. ☐ Affidavit(s)/Declaration(s)
- iv. ☐ Other \_\_\_\_\_

## 2. Miscellaneous

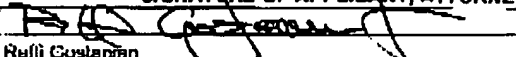
- a. ☐ Suspension of action on the above-identified application is requested under 37 CFR 1.103(c) for a period of \_\_\_\_\_ months (Period of suspension shall not exceed 3 months; Fee under 37 CFR 1.17(i) required)
- b. ☐ Other \_\_\_\_\_

## 3. Fees

- The RCE fee under 37 CFR 1.17(e) is required by 37 CFR 1.114 when the RCE is filed.
- The Director is hereby authorized to charge the following fees, any underpayment of fees, or credit any overpayments, to Deposit Account No. \_\_\_\_\_ I have enclosed a duplicate copy of this sheet.
- a. ☐
- i. ☒ RCE fee required under 37 CFR 1.17(e)
- ii. ☐ Extension of time fee (37 CFR 1.136 and 1.17)
- iii. ☐ Other \_\_\_\_\_ 09/09/2005 MBINAS 00000038 09785048
- b. ☐ Check in the amount of \$ \_\_\_\_\_ and fee: 1801 790.00
- c. ☒ Payment by credit card (Form PTO-2038 enclosed)

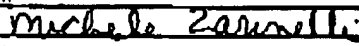
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## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED

|                   |   |                  |        |
|-------------------|---|------------------|--------|
| Signature         |  | Date             | 9/8/05 |
| Name (Print/Type) | Rafi Costantini   | Registration No. | 42,585 |

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|                   |   |      |          |
|-------------------|---|------|----------|
| Signature         |  | Date | 9-8-2005 |
| Name (Print/Type) | Michele Zarnelli  |      |          |

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